

County: Oconto
WOODLANDS OF GILLETT
330 ROBINHOOD LANE
GILLETT

54124 Phone: (920) 855-2136
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/03): 40
Total Licensed Bed Capacity (12/31/03): 43
Number of Residents on 12/31/03: 34

Ownership:
Highest Level License: Corporation
Operate in Conjunction with CBRF? Skilled
Title 18 (Medicare) Certified? No
Title 19 (Medicaid) Certified? Yes
Average Daily Census: Yes 39

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Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	Yes	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		5.9
Supp. Home Care-Personal Care	No					1 - 4 Years		85.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years		0.0
Day Services	Yes	Mental Illness (Org./Psy)	47.1	65 - 74	0.0			----
Respite Care	Yes	Mental Illness (Other)	0.0	75 - 84	29.4			91.2
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	61.8	*****		
Adult Day Health Care	Yes	Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	14.7	65 & Over	100.0	-----		
Transportation	Yes	Cerebrovascular	17.6		-----	RNs		11.8
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		5.0
Other Services	No	Respiratory	2.9		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	17.6	Male	41.2	Aides, & Orderlies		
Mentally Ill	No		----	Female	58.8			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	0	0.0	0	27	100.0	100	0	0.0	0	7	100.0	151	0	0.0	0	0	0.0	34	100.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		27	100.0		0	0.0		7	100.0		0	0.0		0	0.0	34	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	3.8	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0	47.1	52.9	34
Other Nursing Homes	11.5	Dressing	8.8	52.9	38.2	34
Acute Care Hospitals	84.6	Transferring	23.5	61.8	14.7	34
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	20.6	44.1	35.3	34
Rehabilitation Hospitals	0.0	Eating	73.5	20.6	5.9	34
Other Locations	0.0	*****				
Total Number of Admissions	26	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care		11.8
Private Home/No Home Health	29.0	Occ/Freq. Incontinent of Bladder	29.4	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	3.2	Occ/Freq. Incontinent of Bowel	17.6	Receiving Suctioning		0.0
Other Nursing Homes	16.1			Receiving Ostomy Care		2.9
Acute Care Hospitals	9.7	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	2.9	Receiving Mechanically Altered Diets		29.4
Rehabilitation Hospitals	0.0					
Other Locations	3.2	Skin Care		Other Resident Characteristics		
Deaths	38.7	With Pressure Sores	5.9	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	31			Receiving Psychoactive Drugs		85.3

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: Under 50 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	90.7	80.8	1.12	89.7	1.01	84.0	1.08	87.4	1.04
Current Residents from In-County	91.2	73.7	1.24	66.7	1.37	76.2	1.20	76.7	1.19
Admissions from In-County, Still Residing	19.2	19.8	0.97	28.0	0.69	22.2	0.87	19.6	0.98
Admissions/Average Daily Census	66.7	137.9	0.48	74.8	0.89	122.3	0.54	141.3	0.47
Discharges/Average Daily Census	79.5	138.0	0.58	78.2	1.02	124.3	0.64	142.5	0.56
Discharges To Private Residence/Average Daily Census	25.6	62.1	0.41	14.1	1.82	53.4	0.48	61.6	0.42
Residents Receiving Skilled Care	100	94.4	1.06	81.4	1.23	94.8	1.05	88.1	1.14
Residents Aged 65 and Older	100	94.8	1.05	90.0	1.11	93.5	1.07	87.8	1.14
Title 19 (Medicaid) Funded Residents	79.4	72.0	1.10	74.0	1.07	69.5	1.14	65.9	1.21
Private Pay Funded Residents	20.6	17.7	1.16	16.0	1.29	19.4	1.06	21.0	0.98
Developmentally Disabled Residents	0.0	0.8	0.00	0.4	0.00	0.6	0.00	6.5	0.00
Mentally Ill Residents	47.1	31.0	1.52	60.6	0.78	36.5	1.29	33.6	1.40
General Medical Service Residents	17.6	20.9	0.85	11.3	1.57	18.8	0.94	20.6	0.86
Impaired ADL (Mean)	52.9	45.3	1.17	46.5	1.14	46.9	1.13	49.4	1.07
Psychological Problems	85.3	56.0	1.52	62.3	1.37	58.4	1.46	57.4	1.49
Nursing Care Required (Mean)	6.3	7.2	0.87	5.0	1.24	7.2	0.87	7.3	0.85